

CONSUMER CHOICE PHARMACY

JULY 2010-JUNE 2011

This multilevel benefit plan allows you to take more responsibility for your prescription medication decisions. You can compare your medication options and make lower-cost medication choices.

Three Levels of Benefits

LEVEL 1 PHARMACY ACCOUNT

Maricopa County funds 100 percent of your pharmacy account. For the plan year, individuals are allotted \$300 and families are given \$500. You may use this money toward the full cost of the prescriptions you choose. Please note that certain medication categories are excluded, and some medications may require step care or prior authorization. (Consult *Maricopa County Know Your Benefits Guide* and the *Pharmacy Plan Description* for more information.) In these cases, you will need to request authorization by calling toll free 877-665-6609. If at the end of the plan year you have any money left in your pharmacy account, that amount will roll over for your use in the next plan year. Once you have used up the allotted funds in the account, you move to Level 2.

LEVEL 2 EMPLOYEE RESPONSIBILITY

You now fund 100 percent of your medication costs. You must pay \$300 as an individual or \$500 for families

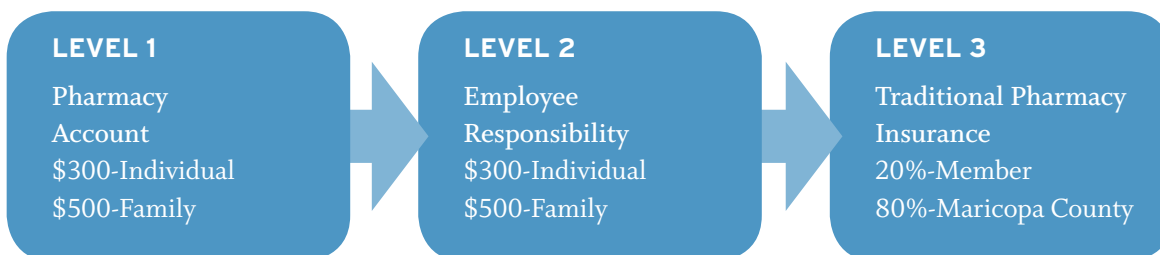
before you and Maricopa County begin to share the cost in Level 3. If an individual is part of a family and has used \$300, that person will only need to pay \$300 of the \$500 before moving to Level 3.

LEVEL 3 TRADITIONAL PHARMACY INSURANCE

You pay 20 percent coinsurance, and Maricopa County pays the remaining 80 percent. When you reach your out-of-pocket maximum of \$1,500 for individuals or \$3,000 for families, you pay nothing further for covered medications during the plan year.

A note about specialty pharmacy: Costs for specialty pharmacy medications are handled differently. You will be charged a \$50 copay, and your out-of-pocket expenses will count toward your out-of-pocket maximum.

THREE LEVELS OF BENEFITS



Frequently Asked Questions

Please refer to the *Guide to Low-Cost Medications*, which can help you and your doctor determine the lowest-cost medication appropriate for your health condition. You are not required to follow a formulary. To find out where to purchase the lowest priced medications (mail order or 90-day retail), visit MyWHI.com. On this web site, you also can look up your current medications and find similar ones that cost less. For more information about your benefit, please refer to your *Maricopa County Know Your Benefits Guide* and the *Pharmacy Plan Description*.

Please note that you still must discuss any possible medication alternatives with your doctor to make sure that they are appropriate for you. You also can talk to your local pharmacist and healthcare provider or call the Walgreens Customer Care Center toll free at 800-207-2568.

Q HOW MUCH WILL I PAY FOR MY MEDICATION?

A The actual price is calculated at the pharmacy counter when you fill a prescription. If you have money in your Level 1 Pharmacy Account, the cost will automatically be deducted. When you have used up the money in the account, you move to Level 2 Employee Responsibility and will pay 100 percent of the cost of the medication. When you have met your Employee Responsibility limit, you move to Level 3 Traditional Pharmacy Insurance and will be charged 20 percent of the cost of the medication until you meet your maximum out-of-pocket limit (\$1,500 for individuals and \$3,000 for families). After that, you will pay nothing to the pharmacy for the remainder of the plan year.

Q WHAT IS MY COPAY FOR PREVENTIVE MEDICATIONS?

A Under this plan, there is no copay when you purchase generic medications on the Preventive Drug

List, which can be found on MyWHI.com under “Preferred Medication List.” Your doctor or other healthcare provider may recommend that you take medications on this list to prevent an illness or a medical condition.

Q WHERE MAY I FILL MY PRESCRIPTIONS?

A You may fill them at any pharmacy in Walgreens Health Initiatives Preferred Pharmacy Network of more than 62,000 participating chain and independent pharmacies nationwide.

Q HOW DOES THE WALGREENS90™ PROGRAM WORK?

A This program allows you to obtain a 90-day supply of your maintenance medications. After your first prescription fill for a maintenance medication and one refill for a 30-day supply at any pharmacy in the Walgreens Health Initiatives network, you will be required to get your third fill as a 90-day supply at either a Walgreens community pharmacy or through Walgreens mail service for the same copay. To take advantage of Walgreens90, your doctor must authorize a 90-day supply of your maintenance medication. (Under applicable law, some medications are not available as a 90-day supply.)

Q HOW CAN WALGREENS HEALTH INITIATIVES VOLUNTARY TABLET SPLITTING PROGRAM HELP ME SAVE MONEY?

A Under this program, you can split a tablet in half that is double the strength of your prescribed dosage and get two doses from one tablet.* You can save up to 50 percent off the cost of your prescription when you split a double strength tablet to take your current dose.

For more information about your Maricopa County healthcare benefits, call 602-506-1010 or visit MyWHI.com.